

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.J.P.E. CLASSIFIER			
FORMALITY REVIEW	H.S.	36	5/24
RESPONSE FORMALITY REVIEW	1A	36-113	06-27-01
			10-2-01

INDEX OF CLAIMS

..... Rejected
 Allowed
 (Through numeral)..... Canceled
 Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

BEST AVAILABLE COPY

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10/2/01
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